

PROGRESS SHEET – APPLICATION FOR CHANGE/TRANSFER

SUBJECT TO REAL ESTATE EXCISE TAX? YES ☐ NO ☒

NAME: Cliff Sears
Grant County PUD 2
PO Box 878
Ephrata, WA 98823

PHONE: (509) 754-6612

Copies scanned & e-mailed to Department of Revenue:

Date: _____

Initial: _____

Chg. Application ROE/ROD Assignment

☐ ASSIGNED (SEE BACK OF PAGE)

APP. NO.	PERMIT NO.	CERT. NO.	CERT. OF CHANGE NO(S)
6716	6371	4848-A	

GRANT COUNTY
GRAN-11-16

WRIA

41

WRTS No. CG3-*06716C

ID No. 4923059

PURPOSE OF APPLICATION: Add 7 POWs & Change the Place of use

Superseding: 5239541

Date Application received: Aug. 29, 2011

Date fee received:

Amount: \$N/A

Statement of additional exam sent: _____ Date fee received: _____ Amount: \$ _____

Returned for completion or correction:

Received:

☒ Application mapped by: *Processed* date: _____

PUBLICATION: GCWCB

Newspaper:

OK'd by:

Date Notice Sent _____

Date Affidavit received: _____

Time expires: _____

Checked by: _____

Date: _____

☐ Protests: _____

☐ Fee rcvd _____

SEPA REQUIRED: NO - EXEMPT

Checklist requested by: _____ date: _____ note: _____

Checklist fwd to SEPA project manager by: _____ date: _____

FIELD EXAMINATION REQUIRED:

☐ YES

☐ NO

*Super. Cert. Issued
4-19-2012*

Examination by: _____ date: _____

☐ ROE map checked by: _____ date: _____

BC due: _____

BC rcvd: _____ ext: _____

CC due: _____

CC rcvd: _____ ext: _____

PA due: _____

PA rcvd: _____ ext: _____

PA FIELD EXAMINATION REQUIRED – DATE: _____ BY: _____

Date OK'd for CHANGE/TRANSFER: _____ By: _____

☐ Chg-ROE map checked by: _____ Date: _____

*Statement of Fee Sent: _____ Fee Received: _____

*Cert. Of Change ONLY

Date CHANGE ROE ISSUED: _____ No. _____

Change/Transfer to be processed by Grant County Water Conservancy Board

ROD received: 45 day review period ends: Review Period Extended to: Ecy Decision Mailed:

12-27-11

2-10-12

2-8-2012

Date mailed to interested parties:

☐ WDFW ☐ State DOH ☐ County DOH ☐ Tribe

☐ W²FO ☐ EhrataFO ☐ Other

ASSIGNMENT INFO:

SUBJECT TO REAL ESTATE EXCISE TAX

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

☐ Mailed assignee copy of current App/ROE date: _____

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Initial:	_____

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